Disclosure Report Cov	er
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An	iendi	nent				
	Yes	S.	Į.	<b>a</b> 1	lo	

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Ir	nformation						
a, Full Name						c. ID Number	
Lynn A Keziah Monrot City councily						3ЈM687	
b. Mailing Address (include City, State and Zip Code)						d. Date Filed	
2807 Vidalia Ct.				AUG Z	7 2015		8/27/15
Monroe, N.C. 28110 Union Co. Board of Elections						e. Phone Number	
			UIIL	и 60, воан	0 01 E18011	OHS	704-221-2365
2. Report Year	2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name						
2015	1/01		08/2				A. Murphy
6. Type of Com					· · · · · · · · · · · · · · · · · · ·	type of repo	rt from one category)
Candidate Cam	=		Municipal		te/County		Referendum
PAC	<u></u>	rendum	Organizational		Organizat	ional	Organizational
Independent Ex			Thirty-five day	′   <sub>—</sub>	Quarterly		Pre-referendum
Legal Expense 1	Fund		Pre-primary	ᄖ	First		Final
en.	166666999666699		Pre-election	ᄖ	Seco		Supplemental Final
7. Type of Fund Booster Fund	l (if applicable,	check one)	Pre-runoff	ᄖ	Thire		Annual
<b>—</b>			Semi-annual	ᄖ	Four		Special Special
Building Fund			Mid Year	· I	Semi-ann		
<b>—</b> 045		Ī	Year End	·		Year	10. Special Report Name
Other:			Final	ᄖ		: End	
8. Number of Fi ව	ingraisers this	Keport	Special	ᄖ	Final		
				L	Special		
11. Account Info	ormation			11. Accou	nt Inforn	nation	
a. Financial Institut	ion Full Name			a. Financial	Institution	Full Name	
5/3/ Ban	k						
b. Purpose		c. Account Cod	e	b. Purpose			c. Account Code
Candidat	e Campaign	01					
		d. Period Begin Balance					d. Period Begin Balance
		<b>\$</b> 0					\$
CERTIFICATI	ON						
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.  James A Murphy  Printed Name of Signer  Signature of Appointed Treaturer  Date							
FOR OFFICE U	JSE ONLY	_				•	
Date Receive	ed: <u>8/</u>	27/15	Employ	ree: KY	aur	~ Del □	<u>ivery Method</u> Normal Mail
Date Postma	rked:	<u>A</u>	Employ	ree:	)	- <sub>\ \</sub> \	Registered Mail Hand Delivered
Date Scanned	d: <b>8/</b> 2	27/15	Employ	ree:	focus		Electronically Filed
Date Data Er	ntered:		. Employ	ee:			Signer has not received mandatory training
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.							
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.							

**Detailed Summary**Use this form to summarize all disclosure reporting forms and to total monetary information

		3. ID Number
35 D	AY	Joinn Go. Board of Eld
	Total this Reporting Period	Total this
	\$ O	\$
(CRO-1205)	\$	\$
(CRO-1210)	\$ 600	\$ 600
(CRO-1220)	\$	\$
(CRO-1230)	\$	\$
(CRO-1410)	\$	\$
(CRO-1240)	\$	\$
(CRO-1250)	\$	\$
(CRO-1250)	\$	\$
(CRO-1250)	\$	\$
(CRO-1270)	\$	\$
(CRO-1265)	\$	\$
,11d and 11e)	\$ 600	\$ 600
(CRO-1310)	\$	\$
(CRO-1310)	\$	\$
(CRO-1310)	\$	\$
(CRO-1315)	\$	\$
(CRO-1420)	\$	\$
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(CRO-1330)	\$	
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(CRO-1710)	\$	\$
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(CRO-1215)	\$	\$ August 200
	(CRO-1205) (CRO-1210) (CRO-1220) (CRO-1230) (CRO-1240) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1250) (CRO-1310)	CRO-1250   S

## RECEIVED

AUG 27 2015

			AUG 4 /	1 6010			Amendment	
Contributions from Individuals  Use this form to report individual contributions lower \$50 for contributions under \$50 if form CRO 1205 is not used								
		ne (and Fund if app			υι φυ υ		ID Number	
Lynn A Keziah MONROF CITY COUNCIL						3JM687		
3. Contributor Information								
a. Full Name, Mailing Address & Phone			b. Job Title/Profes	ssion	d. C	Comments		
(include city, state, & zip)			Self-Emp?	haavol	,	ersonnel Check		
Lynn Keziah			Self-Employeed			ersonner check		
2807 Vidalia Ct.			c. Employer's Name/Specific Field					
Monroe, N. C. 28110				Self	:	e. E	lection Sum to Date	
				Real ESTATE		\$	( <b>0</b> 0.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	y <b>y</b> )	k. Amount	
	1	Check	T		7/13/15		\$ 100.00	
							\$	
				1			\$	
Charles and the parties	tributor Informa	And the second s		Add 🔲 Ren	move			
	ame, Mailing Addre			b. Job Title/Profes	ssion	d. C	Comments	
(includ	de city, state, & zip)			Attornor		Dorgonno' Cha-'		
Ben	nett Glass		,	Attorney c. Employer's Name/Specific Field		Pt	ersonnel Check	
	.l Ridge Woo	od Dr.		c. Employer's Nam	ne/Specific Field	-		
	roe, N.C.			Bennett Glass P.A.		e, E	e. Election Sum to Date	
						\$	<b>5</b> 00.00	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	(y)	k. Amount	
	1.	Check			8/10/15		\$ 500.00	
							\$	
							\$	
3. Cont	tributor Informa	ation		Add 🔲 Ren	nove			
	ame, Mailing Addre			b. Job Title/Profes	sion	d, C	Comments	
(includ	le city, state, & zip)							
			!	c. Employer's Name/Specific Field		-		
			,			e. El	lection Sum to Date	
			,			\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	<u>—</u> /у)	k. Amount	
							\$	
							\$	
		. 6466					\$	
4. Tot	al only this Pa	age				\$	600,:00	
Andrew Street Street		RO-1210 Pages				1		
		of Detailed Summary P	age CRO-1100)			\$	600,00	